

FIG. 1

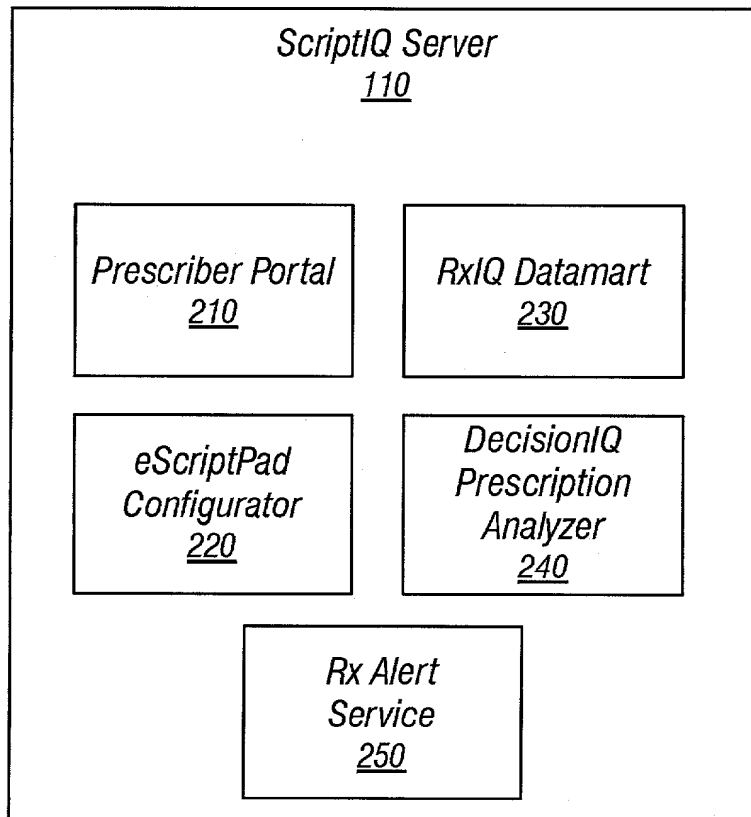
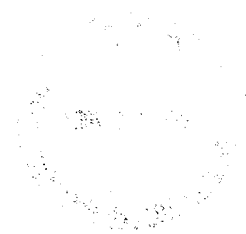


FIG. 2

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300



XXXXXXX, MD
XXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXX

DEA # XXXXXXXXXXXX
CA LICENSE #XXXXXXX

PATIENT NAME: _____ DATE: _____
ADDRESS: _____

- | | | |
|--|--|--|
| <input type="checkbox"/> ADALAT CC 30/ 60 /90 MG | <input type="checkbox"/> DYZIDE | <input type="checkbox"/> METFORMIN 500/850 MG |
| <input type="checkbox"/> ALLEGRA 60 MG | <input type="checkbox"/> ENALAPRIL 5 / 10 MG | <input type="checkbox"/> METOPROLOL 50 MG |
| <input type="checkbox"/> AMOXICILLIN 250/500 MG | <input type="checkbox"/> FUROSEMIDE 20 / 40 MG | <input type="checkbox"/> NAPROXEN 375 / 500 MG |
| <input type="checkbox"/> ATENOLOL 50 MG | <input type="checkbox"/> IBUPROFEN 600 / 800 MG | <input type="checkbox"/> NASACORT AQ |
| <input type="checkbox"/> CAPTOPRIL 12.5 / 25 MG | <input type="checkbox"/> KCI 8 /10 / 20 mEq. | <input type="checkbox"/> PREMARIN 0.3 / 0.625 MG |
| <input type="checkbox"/> CELEXA 20 / 40 MG | <input type="checkbox"/> LIPITOR 10 / 20 / 40 MG | <input type="checkbox"/> PREMPRO 0.625 / 2.5 MG |
| <input type="checkbox"/> CEPHALEXIN 250/500 | <input type="checkbox"/> LOTENSIN 10 / 20 / 40 | <input type="checkbox"/> RANITIDINE 150/300 |

☐ OTHER _____

SIG _____

QD BID TID QID PRN QTY: _____ REFILL X _____

☐ DAW

☐ SPECIAL INSTRUCTIONS ON BACK OF PRESCRIPTION

PROVIDER SIGNATURE _____

FILL WITH GENERIC DRUG UNLESS OTHERWISE STATED. ONLY ONE
MEDICATION PER PRESCRIPTION.

FIG. 3

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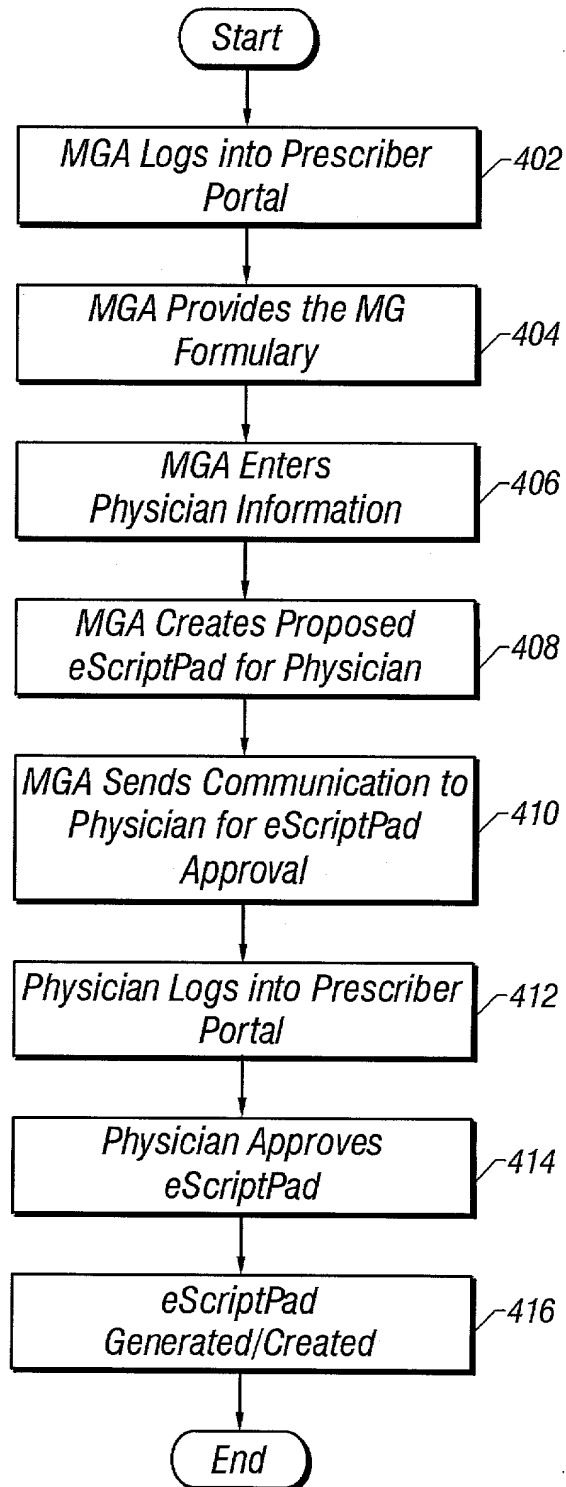


FIG. 4

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Oral Contraceptives	Cost	HN/F	PC/SH	WHA	Aetna	Cigna	BC	BS
Necon, Norinyl, Norethin, Ortho Novum, \$11-27 Genora--1/50 (generics)		X	X	X	X	X	X	X
Necon, Norinyl, Norethin, Ortho Novum, \$11-27 Genora, Jenest, Nelova--1/35 (generics)		X	X	X	X	X	X	X
Modicon, Genora, Necon, Nelova, Brevicon--0.5/35	\$20	X	X		X	X	X	X
Ovrette	\$25	X		X	X			X
Desogen, Ortho-Cept	\$27	X	X	X	X	X	X	X
Estrostep	\$27	X			X			
Tri-Norinyl	\$28	X	X	X		X	X	X
Triphasil, Tri-Levien	\$29	X	X	X	X	X	X	X
Mircette	\$30	X	X				X	
Nordette, Levlen, Levora	\$30	X	X	X	X	X	X	X
Lo-Ovral	\$31	X	X	X	X	X	X	X
Ortho Cyclen	\$31	X		X	X		X	
Ortho-Tri-Cyclen	\$31	X		X	X		X	
Ortho Novum 777	\$31	X		X	X	X	X	
Demulen, Zovia--1/35, 1/50	\$31-35	X	X	X		X	X	X
Ovcon--35, 50	\$32/35			X		X	X	
Alesse, Levlite	\$32	X	X	X	X	X	X	X
Loestrin, Loestrin Fe 1/20, 1.5/3.0	\$33	X		X	X	X	X	X
Ortho Novum, Necon--10/11	\$34	X			X	X	X	
Micronor, Nor-Q-D	\$35	X	X	X	X	X	X	X
Ovral	\$50	X	X		X	X	X	

FIG. 5A

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Hormone Replacement Therapy	Cost	HN/F	PC/SH	WHA	Aetna	Cigna	BC	BS
Provera, Cycrin (generic) 5mg	\$5	X	X	X	X	X	X	X
Estrace (generic)	\$6	X	X	X	X	X	X	X
Estropipate-Ogin (generic) 0.625mg	\$6	X	X	X	X	X	X	X
Menest 0.625mg	\$7	X	X			X	X	X
Cenestin 0.625mg	\$18							
Estratab 0.625mg	\$19	X	X		X	X	X	
Premarin 0.625mg	\$21	X	X	X	X	X	X	X
Prempro 0.625mg/2.5mg	\$31	X	X	X	X	X	X	X
FemHRT	\$25							
Ortho-Prefest	\$25						X	
Activella	\$26							X
Climara 0.05mg/24 hrs (4 patches/mo)	\$27	X				X	X	X
Vivelle 0.05mg/24 hrs (8 patches/mo)	\$28		X	X	X	X	X	X
Estraderm 0.05mg/24 hrs (8 patches/mo)	\$28	X	X	X	X	X	X	
Estratest 2.5mg/1.25, Estratest HS	\$40/32	X	X	X	X	X	X	X

Antihistamines	Cost	HN/F	PC/SH	WHA	Aetna	Cigna	BC	BS
Fexofenadine (Allegra) 60mg BID prn	\$42	X	X	X		X	X	X
Cetirizine (Zyrtec) 10mg qd	\$49	X*		X*	X		X	
Azelastine (Astelin) Nasal Spray 2 sprays each nostril BID prn	\$50	X	X		X		X	
Loratadine (Claritin) 10mg qd	\$61	X	X		X	X	X	X

*Zyrtec syrup is covered for children <12

FIG. 5B

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Antidepressants	Cost Y	HN/F	PC/SH	WHA	Aetna	Cigna	BC	BS
<i>Amitriptyline (generic)</i>	\$4	X	X	X	X	X	X	X
<i>Trazodone (generic)</i>	\$5	X	X	X	X	X	X	X
<i>Nortriptyline (generic)</i>	\$6	X	X	X	X	X	X	X
<i>Imipramine (generic)</i>	\$9	X	X	X	X	X	X	X
<i>Desipramine (generic)</i>	\$9	X	X	X	X	X	X	X
<i>Citalopram (Celexa)</i>	\$51	X	X	X			X	X
<i>Paroxetine (Paxil)</i>	\$63	X	X	X	X	X	X	X
<i>Sertraline (Zoloft)</i>	\$63	X		X	X	X	X	
<i>Nefazodone (Serzone)</i>	\$65	X	X	X	X	X	X	X
<i>Venlafaxine (Effexor XR)</i>	\$73	X	X	X	X		X	
<i>Bupropion (Wellbutrin SR)</i>	\$75	X		X	X		X	X
<i>Mirtazapine (Remeron)</i>	\$76	X		X	X		X	X
<i>Fluoxetine (Prozac)</i>	\$108	p		X*	X	X	X	X

*PA if higher dose

FIG. 5C

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Antibiotics - Adults	Cost	HN/F	PC/SH	WHA	Aetna	Cigna	BC	BS
Penicillin	\$3	X	X	X	X	X	X	X
TMP/SMX	\$3	X	X	X	X	X	X	X
Doxycycline	\$3	X	X	X	X	X	X	X
Metronidazole	\$3	X	X	X	X	X	X	X
Tetracycline	\$4	X	X	X	X	X	X	X
Amoxicillin	\$4	X	X	X	X	X	X	X
Cephalexin	\$5	X	X	X	X	X	X	X
Erythromycin	\$6	X	X	X	X	X	X	X
Sulfa/Erythro	\$8	X	X	X	X	X	X	X
Dicloxacillin	\$9	X	X	X	X	X	X	X
Nitrofurantoin	\$12	X	X	X	X	X	X	X
Clindamycin	\$21	X	X	X	X	X	X	X
Cefaclor (generic)	\$25	X	X	X	X	X	X	X
Azithromycin (Zithromax)	\$35	X	X	X		X	X	X
Clarithromycin (Biaxin)	\$55	X	X		X	X	X	X
Cefprozil (Cefzil) peds pricing	\$60	X	X	X		X	X	X
Gatifloxacin (Tequin)	\$53	X	X*					
Levofloxacin (Levaquin)	\$60			X	X		X	
Moxifloxacin (Avelox)	\$61							
Ciprofloxacin (Cipro)	\$63	X	X	X	X	X	X	X
Amoxicillin/Clavulanate (Augmentin)	\$80	X	X	X	X	X	X	X
peds-\$65								
Cefuroxime (Ceftin)	\$85	X	X		X	X	X	X

* > 65 years old w/CAP (community acquired pneumonia)

FIG. 5D

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Nsaids	Cost	HN/F	PC/SH	WHA	Aetna	Cigna	BC	BS
Indomethacin (generic) 25mg tid	\$4	X	X	X	X	X	X	X
Ibuprofen (generic) 600mg tid	\$4	X	X	X	X	X	X	X
Piroxicam (generic) 10mg bid	\$4	X	X		X	X	X	X
Naproxen (generic) 500mg bid	\$7	X	X	X	X	X	X	X
Salsalate (generic) 750mg ii bid	\$8	X	X	X	X	X	X	X
Ketoprofen (generic) 75mg tid	\$10	X	X	X	X	X	X	X
Etodolac-Lodine (generic) 400mg bid	\$24		X		X	X	X	X
Diclofenac-Na-Voltaren (generic) 50mg tid	\$27	X	X	X	X	X		X
Diclofenac-K (generic) 50mg tid	\$36	X				X		X
Tolmetin (generic) 400mg bid	\$37	X	X		X	X	X	
Meloxicam (Mobic) 15mg qd	\$65							
Refecoxib (Vioxx) 25mg qd	\$76	p		p	p		p	
Celecoxib (Celebrex) 200mg qd	\$76	p			p		p	
Nabumetone (Relafen) 500mg ii qd	\$82							
Oxyprozin (Daypro) 600mg ii qd	\$101							
Celecoxib (Celebrex) 200mg bid	\$151	p			p		p	

Green- Best Practice Preferred Choice
 Black- No Specific Recommendation
 Pink- Prior Auth., or step therapy, or has quantity or age limits
 Y - Utilization Pricing
 YY- AWP Pricing

**XYZ MEDICAL
GROUP**

Formulary
Selection
Guide

FIG. 5E

10/22

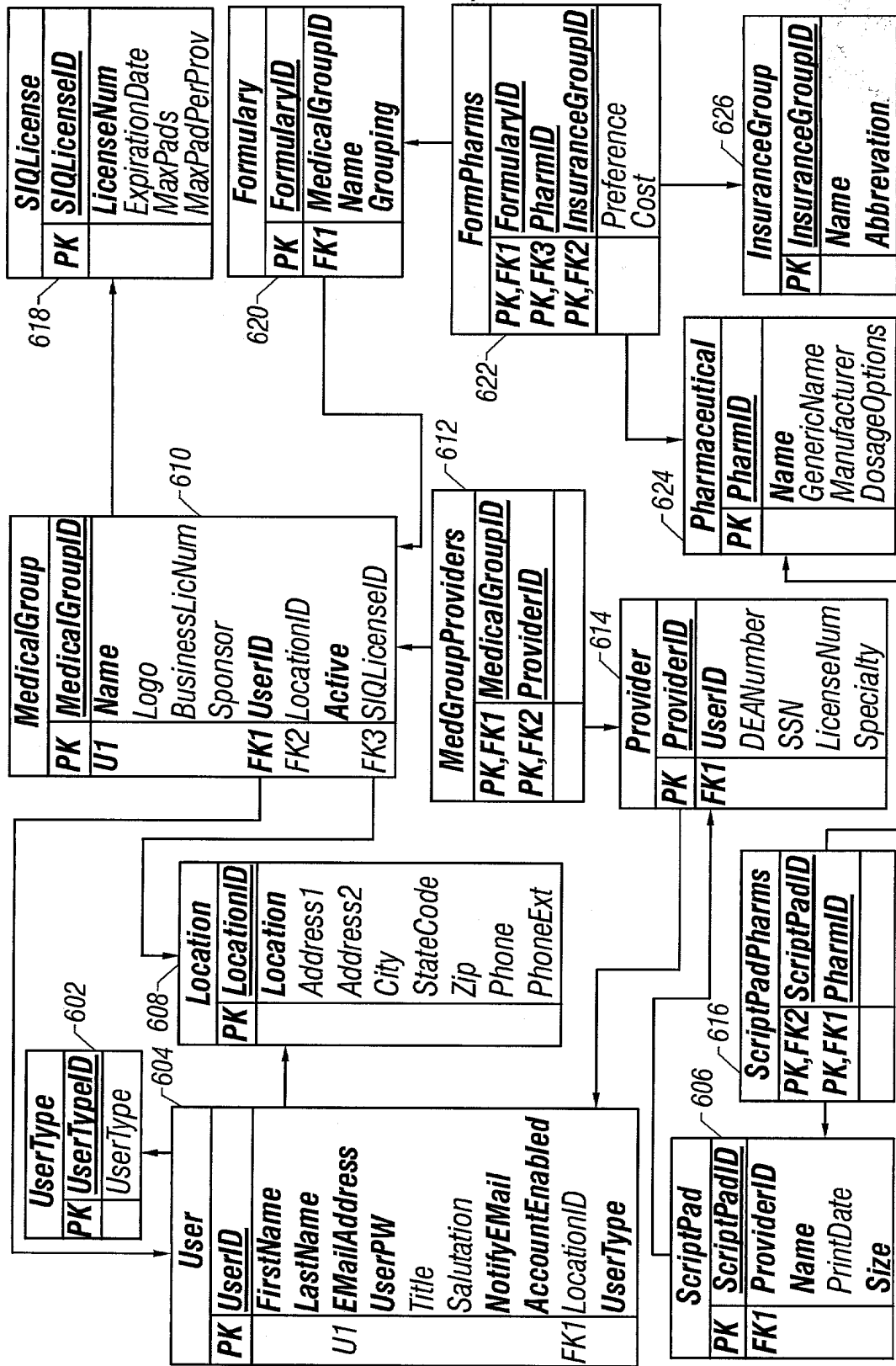



FIG. 6

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SCRIPT INTELLIGENT PRESCRIBING SOLUTIONS		Personal Profile (Physician)	
Welcome Dr. John Doe			
<div>My eScript Pads</div> <div>My Account</div> <div>Account History</div> <div>Order eScript Pads</div>			
		<div>Personal Information</div> <div>Subscriber ID Type: <input type="text" value="DEA"/> ID #: <input type="text"/> <input type="button" value="Lookup"/></div> <div>Salutation: <input type="text" value="Dr."/> First Name: <input type="text"/> Last Name: <input type="text"/> Suffix: <input type="text"/></div> <div>Specialty: <input type="text" value="Pediatrics"/> Title: <input type="text"/> (DO, MD, Etc.)</div>	
		<div>Sponsor Group/Practice Information</div> <div>Type: <input type="text" value="Physician Practice"/> Sponsorship Code: <input type="text"/></div> <div>Name: <input type="text" value="Search"/> The Everett Clinic</div> <div>Practice Specialty: <input type="text" value="Pediatrics"/></div> <div>Address / Shipping Information</div> <div>Address Type: <input type="text" value="Office"/></div> <div>Street Address: <input type="text"/></div> <div>Dept/Suite/Etc: <input type="text"/></div> <div>City: <input type="text"/> State: <input type="text" value="AK"/> Zip/Postal Code: <input type="text"/></div> <div>Shipping Contact: <input type="text"/></div> <div>Phone: <input type="text"/></div> <div>Fax: <input type="text"/> <input type="button" value="Update"/></div>	

FIG. 7

SCRIPT 

INTELLIGENT PRESCRIBING SOLUTIONS

Welcome Dr. John Doe

My eScript Pads

My Account

Account History

Order eScript Pads

Editing: Standard Pad

Choose from the following medications

ACCU-CHEK

ACCUPRIL

ACETAMINOPHEN W/CODEINE

ALBUTEROL

ALLOPURINOL

ALPRAZOLAM

AMANTADINE HCL

AMBIEN

AMTRIPTYLINE HCL

AMOXICILLIN

AMOXIL

ANUSOL-HC

ATENOLOL

ATENOLOL W/CHLORTHALIDONE

AUGMENTIN

AXIN

ATMACORT

BENZONATE

BIAXIN

BUSPAR

BUTALBITAL W/AC

CARDIZEM CD

CARDURA

CARTIA XT

Modify Medications

Medications selected for your eScriptPad

Add

Remove

ACETAMINOPHEN W/CODEINE

ALBUTEROL

ALLOPURINOL

AMOXIL

ANUSOL-HC

ATENOLOL

AXIN

ATMACORT

BENZONATE

BIAXIN

BUTALBITAL W/AC

CARDIZEM CD

CARTIA XT

CECILOR CD

CEFDROXIL MONOHYDRATE

CEFZIL

CELEBREX

CHLORTHALIDONE

CIPRO

CL ARTIN

CYCLOBENZAPRINE HCL

DARVOCEP-N 100

DAYPRO

DESIPRAMINE HCL


The ability to remove medications from the pad can be limited by the sponsoring group or medical group

Available medications may be limited based upon the list of medications approved by the physician's sponsoring group or medical group

Update

Preview

FIG. 8



SCRIPT
INTELLIGENT PRESCRIBING SOLUTIONS
Welcome Dr. John Doe

eScriptPad Preview

Preview: Standard Pad

My eScript Pads

My Account

Account History

Order eScript Pads

Formulary Changes

Product Notices

Reporting

Order Rx Supplies

Rx Alerts

Order this eScriptPad

MedClinic
MEDICAL GROUP
HEALTH CARE EXCELLENCE
WITH COMPASSION

XXXXXX, MD
XXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXX

DEA # XXXXXXXXXX
CA LICENSE #XXXXXXX

PATIENT NAME: _____ DATE: _____

ADDRESS: _____

<input type="checkbox"/> ADALATCC 30/60 /90 MG	<input type="checkbox"/> DIAZIDE	<input type="checkbox"/> METFORMIN 500/850 MG
<input type="checkbox"/> ALLEGRA 60 MG	<input type="checkbox"/> ENALAPRIL 5 / 10 MG	<input type="checkbox"/> METOPROLOL 50 MG
<input type="checkbox"/> AMOXICILLIN 250/500 MG	<input type="checkbox"/> FUROSEMIDE 20 / 40 MG	<input type="checkbox"/> NAPROXEN 375 / 500 MG
<input type="checkbox"/> ATENOLOL 50 MG	<input type="checkbox"/> IBUPROFEN MG	<input type="checkbox"/> NASACORT AQ
<input type="checkbox"/> CAPTOPRIL 12.5 / 25 MG	<input type="checkbox"/> KCI 8 /10 / 20 mEq.	<input type="checkbox"/> PREMARIN 0.3 / 0.625 MG
<input type="checkbox"/> CELEXA 20 / 40 MG	<input type="checkbox"/> LIPTOR 10 / 20 / 40 MG	<input type="checkbox"/> PREMPRO 0.625 / 2.5 MG
<input type="checkbox"/> CEPHALEXIN 250/500	<input type="checkbox"/> LOTENSIN 10 / 20 / 40 MG	<input type="checkbox"/> RANITIDINE 150/300
<input type="checkbox"/> DILACOR XR 180/240MG	<input type="checkbox"/> MAXIDE 25 MG	<input type="checkbox"/> RHINOCORT AER
<input type="checkbox"/> OTHER		

SIG _____

QD BID TID QID PRN QTY: _____ REFILL X _____

☐ DAW

☐ SPECIAL INSTRUCTIONS ON BACK OF PRESCRIPTION

PROVIDER SIGNATURE _____


FILL WITH GENERIC DRUG UNLESS OTHERWISE STATED. ONLY ONE MEDICATION PER PRESCRIPTION.

FIG. 9

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FIG. 10

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SCRIPT 

INTELLIGENT PRESCRIBING SOLUTIONS


Welcome Dr. John Doe

My eScript Pads

My Account

Account History

Order eScript Pads

Shopping Cart 

Qty	Description	Price	Total
<div><div>50</div><div></div></div>	Standard eScript Pads (100 pages per pad)	\$ 2.50	\$ 125.00
<div><div></div><div></div></div>			

\$ 125.00

Checkout

Order Rx Supplies

1100

FIG. 11

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To: Medical Group User
From: eScriptIQ System Alert Service
Date: November 1, 2001
Subject: ALERT - Changes to eScriptPad Prescription Pads

Dear Medical Group User,

We have noted that you have changed the formulary for your medical group. The eScriptPad prescription pads for the following doctors are affected and should be changed:

Dr. John Doe john DOE@scriptiq.com
Dr. Mary Smith marysmith@scriptiq.com
Dr. Jack Jones jack jones@scriptiq.com

You can revise their prescription pads by clicking on this link: <http://www.ScriptIQ.com/login.html>.

Sincerely,
ScriptIQ Alert Administrator

FIG. 12

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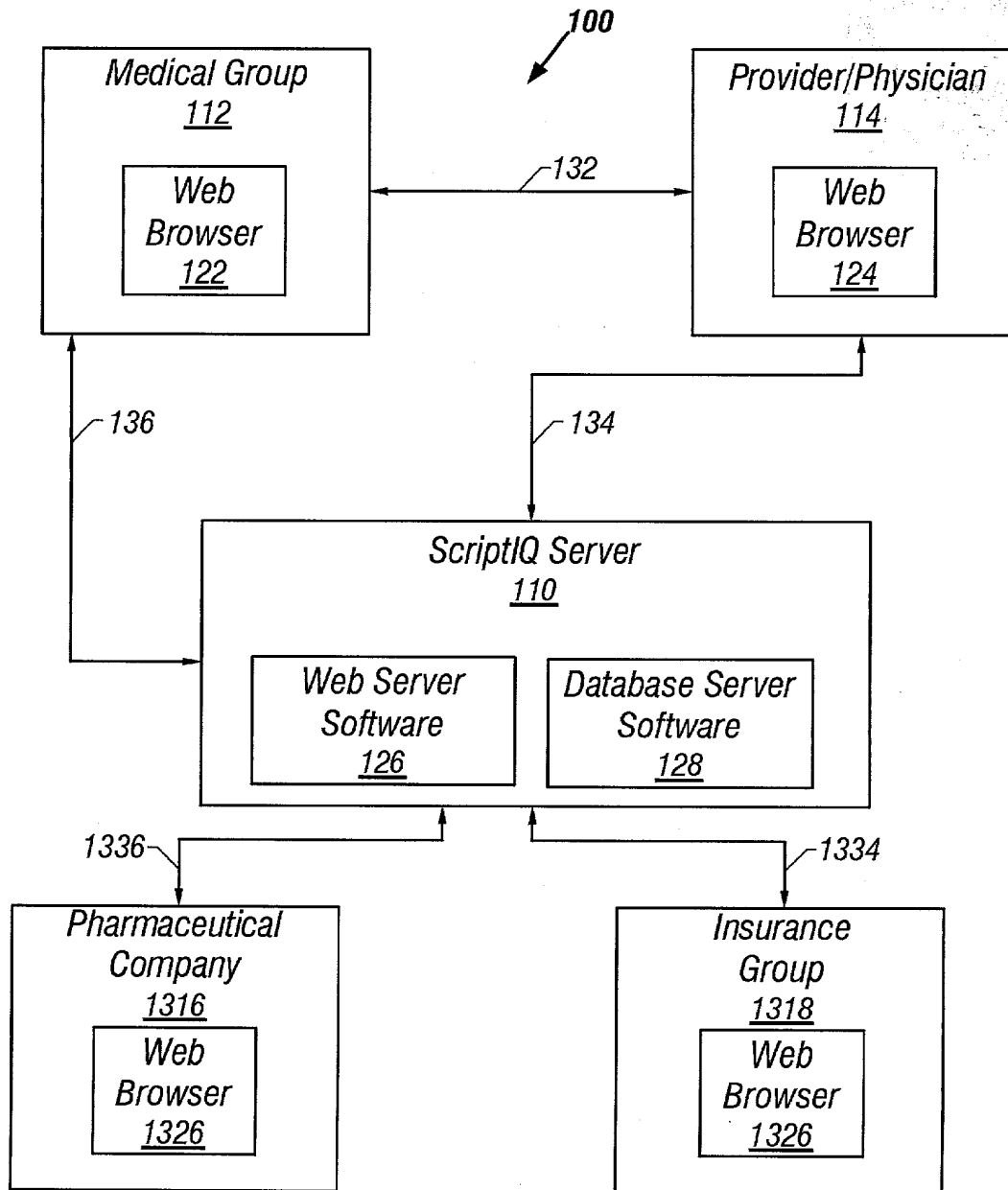


FIG. 13

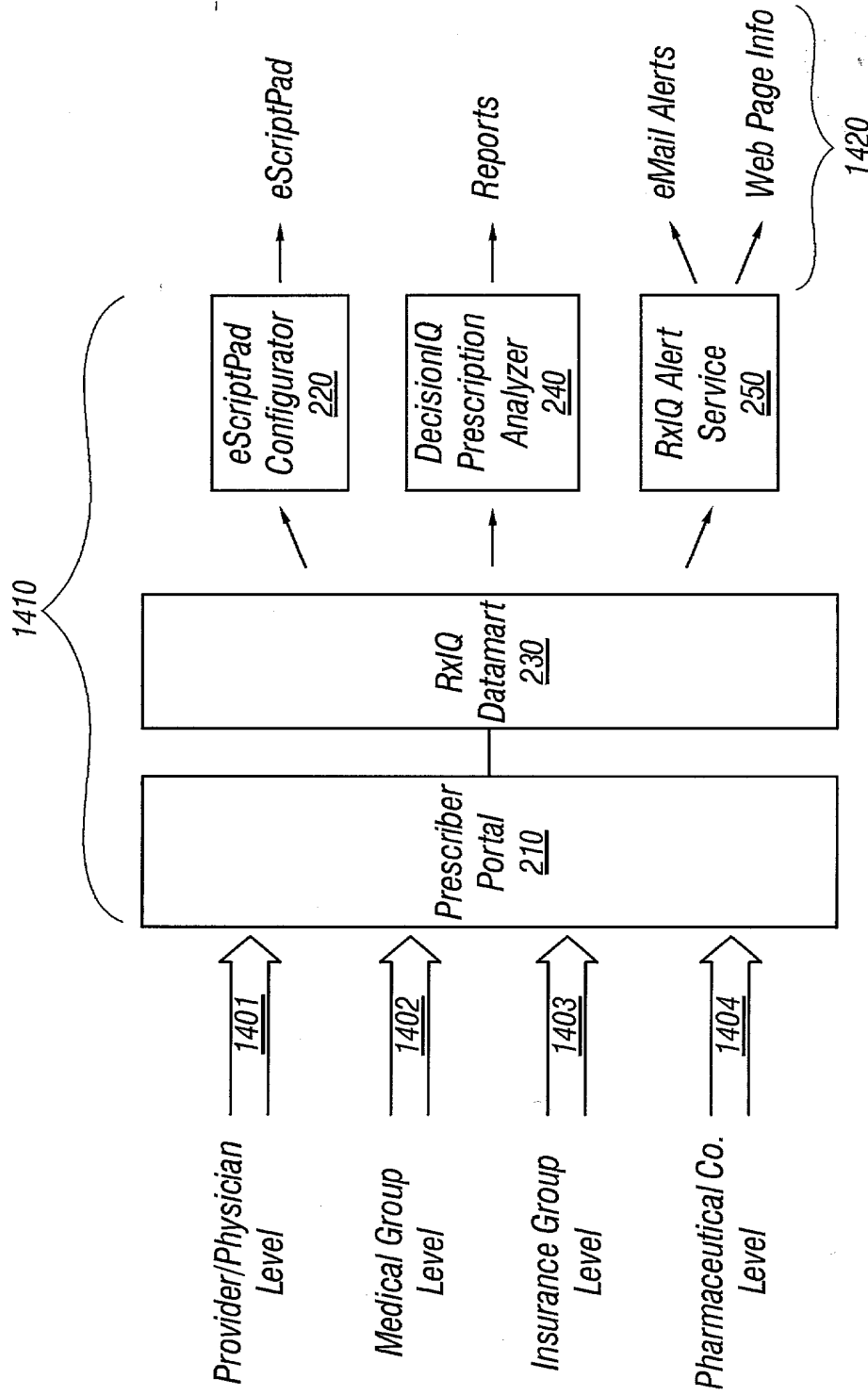


FIG. 14

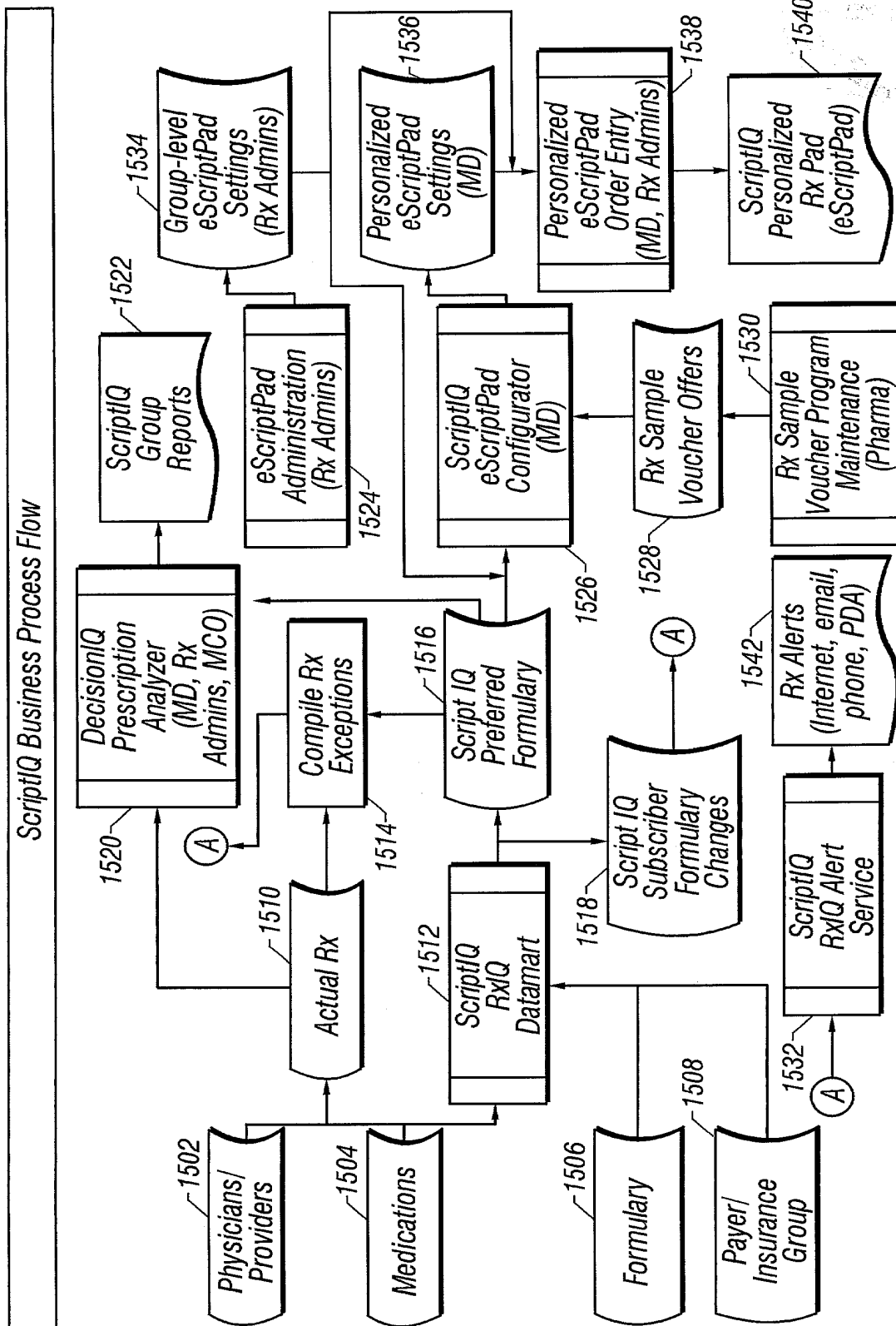


FIG. 15

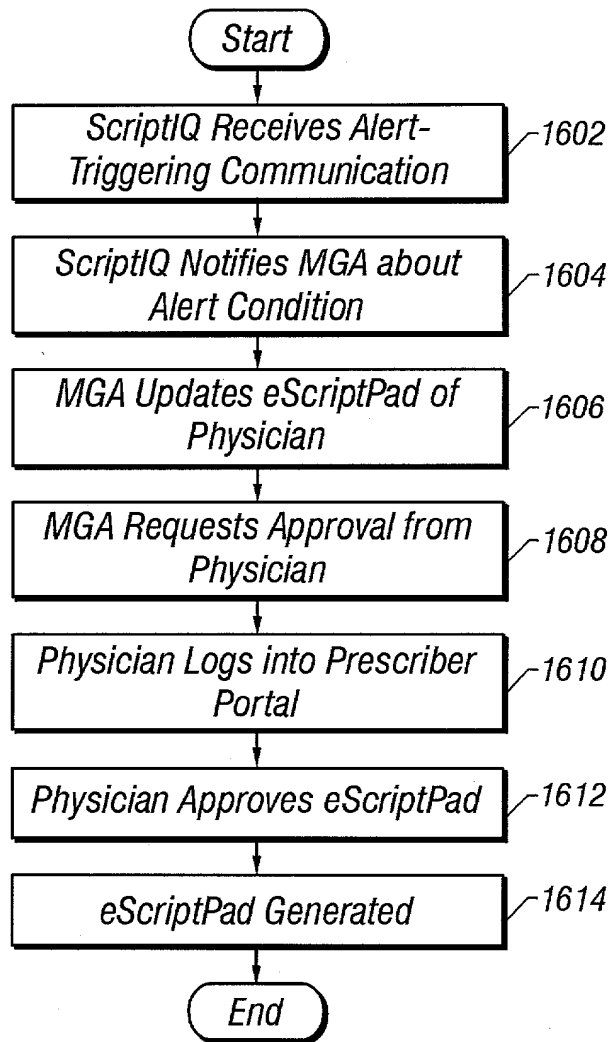


FIG. 16

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To: Medical Group User
From: eScriptIQ System Alert Service
Date: November 1, 2001
Subject: ALERT - Changes to eScriptPad Prescription Pads

Dear Medical Group User,

We have received a communication from ABC Pharmaceutical Company stating that pharmaceutical product 123AB has been recalled. Please see <http://www.ScriptIQ.com/RxAlertService/Alert1987.html> for any additional information.

The eScriptPad prescription pads for the following doctors are affected and should be changed:

Dr. John Doe [johndoe@scriptiq.com](mailto: johndoe@scriptiq.com)
Dr. Mary Smith [marysmith@scriptiq.com](mailto: marysmith@scriptiq.com)
Dr. Jack Jones [jack.jones@scriptiq.com](mailto: jack.jones@scriptiq.com)

You can revise their prescription pads by clicking on this link: <http://www.ScriptIQ.com/login.html>.

Sincerely,
ScriptIQ Alert Administrator

FIG. 17

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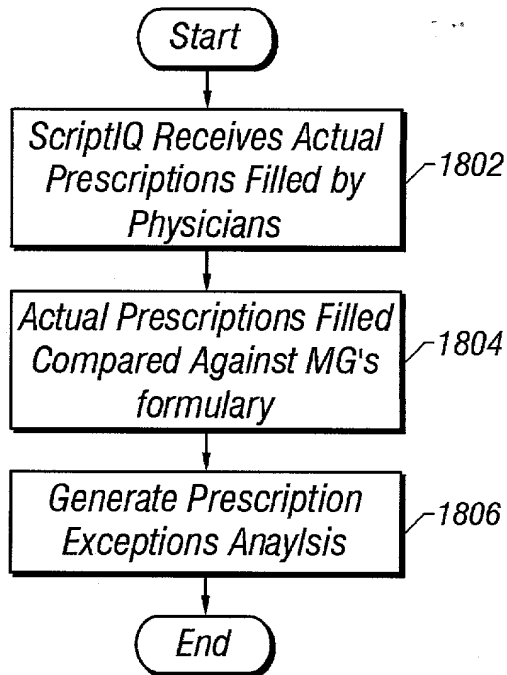


FIG. 18

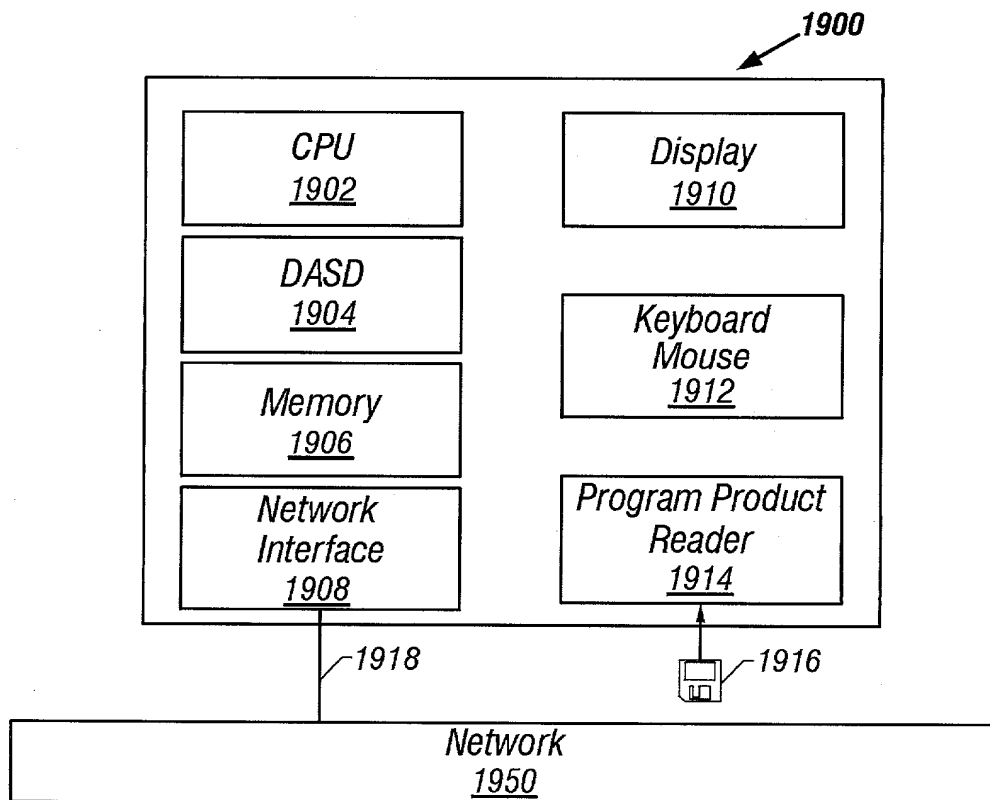


FIG. 19